

PK-2 BULLYING, HARASSMENT & SAFETY CONCERN REPORT

Adult-assisted form: the child may point, speak, draw, or use their own words.

Adult directions: Read the choices aloud. Let the child point, speak, or draw. Record the child's exact words when possible. The child does not need to decide whether the behavior is bullying. If the child may be unsafe, act immediately.

1. ABOUT THE CHILD AND THE ADULT HELPING

Date _____	Child's name _____	Grade: ☐ PK ☐ K ☐ 1 ☐ 2 _____	Teacher _____
School _____ -	Adult completing/helping _____	Adult role _____	Child participated: ☐ Yes ☐ No ☐ Partly

How did the school learn about this? ☐ Child told ☐ Adult saw it ☐ Another child told ☐ Parent/guardian report ☐ Staff report ☐ Other: _____

2. CHILD: POINT TO OR CHECK WHAT HAPPENED

 ☐ Mean words Name-calling, teasing, rumors, or threats.	 ☐ Hitting or pushing Hitting, kicking, pushing, tripping, or chasing.
 ☐ Things were taken or broken Taking, hiding, or damaging belongings.	 ☐ Left out on purpose Repeatedly leaving someone out or turning friends against them.
 ☐ Mean behavior online Mean messages, pictures, videos, games, or pretending to be someone else.	 ☐ Scared or pressured Trying to scare someone or make them give something or stay quiet.
 ☐ Unwanted touching Touching that was not wanted or comments about someone's body.	 ☐ Mean after someone told Getting back at someone for telling, helping, or reporting.

3. CHILD: HOW DO YOU FEEL?

 ☐ Okay	 ☐ Sad	 ☐ Scared or worried	 ☐ Angry or hurt
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☐ My body hurts. Where? _____ ☐ I do not know. ☐ Something else: _____

4. WHEN AND WHERE?

When? ☐ Today ☐ Yesterday ☐ Another day ☐ Not sure	How many times? ☐ One time ☐ More than one time ☐ Keeps happening ☐ Not sure
Where? ☐ Classroom ☐ Playground ☐ Hall ☐ Lunch ☐ Bus ☐ Bathroom ☐ Online ☐ Other: _____	Is the child unsafe right now? ☐ No ☐ Yes ☐ Not sure

Child's words: Write what the child says as exactly as possible. Use quotation marks for the child's words.

PVUSD | PK-2 BULLYING, HARASSMENT & SAFETY CONCERN REPORT**5. WHO WAS INVOLVED?**

Child who may have been hurt or targeted _____	Grade _____	Child(ren) whose behavior is being reported _____	Grade(s) _____
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Who saw or heard it?	What might this person know?
Name / grade / adult role _____	What was seen or heard _____
Name / grade / adult role _____	What was seen or heard _____

6. ADULT OBSERVATIONS AND AVAILABLE INFORMATION

Adult observed: ☐ Injury/mark ☐ Damaged or missing item ☐ Change in behavior ☐ Fear/avoidance ☐ Trouble learning/attending ☐ No visible signs ☐ Other: _____

Information available: ☐ Screenshot/message ☐ Picture/video ☐ Note/drawing ☐ Damaged item ☐ School record ☐ No evidence known ☐ Other: _____

Adult observations or additional information

7. SAFETY AND SUPPORT NEEDED

☐ Immediate adult support ☐ Help staying apart/no contact ☐ Trusted-adult check-in ☐ Counselor support ☐ Playground/classroom/bus support ☐ Online-safety help ☐ Parent/guardian contact ☐ Other: _____

What may help the child feel safe and ready to learn?

8. WAS THIS REPORTED BEFORE?

☐ No ☐ Yes ☐ Not sure	Who was told and when? _____	What happened after the report? _____
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9. ADULT REPORTER / HELPER

Adult name and role _____	Signature/initials _____	Date _____ -	Best contact information _____
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10. SCHOOL INTAKE - STAFF USE

Date/time received _____	Received by _____	Immediate safety action _____
Assigned administrator/designee _____	Parent/guardian contact _____	Student support/counselor contact _____
Follow-up date _____	Case/reference no. _____	Other referral/process, if needed _____

Administrator notes, next steps, and follow-up

Staff note: This form records a concern; it is not a finding. Respond to immediate safety needs, review the information, preserve available evidence, and document follow-up.